Approved for use through 7/3 1/2006, OMB 05 1 0001 PTO/SB/d (12-04) Under the Paperwick Reduction Act of 1995, no persons are required to respond to a collection of information unless & displays a yeard OMB control tumber. PATENT APPLICATION FEE DETERMINATION RECORD Appleating or Doct of Humber Substitute for Form PTO-875 161 Effective December 8, 2004 699 ln 6 APPLICATION AS FILED - PART I · (Column 1) OTHER THAI (Column 2) SMALL ENTITY OR . SMALL ENTITY FOR NUMBER FLED NUMBER EXTRA RATEM BASIC FEE FEE (S) RATERI NA (2) CFR 4.16(1), (N. 0 (C)) FE (I) N/A 150.00 SEARCH FEE NIA 300.00 · N/A by cel a rold the or (w) NA · NVA \$250 EXAMINATION FEE HIA \$500 NA (37 CFR 1.16(q.(p), ex (q)) NA NIA \$100 NIA TOTAL CLAIMS \$200 P7 OFR 1.16(0) X\$ 25 minus 20 4 XSSO INDEPENDENT CLAIMS OR OF CFR LIGHT X100 anthus 3 . . X200 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1.16(4)) additional 60 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(0) +180= +360-"If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Cotumn 1) (Column 2) OR OTHER THAN SMALL ENTITY CLAMS SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT 128/0 RATE (1) AFTER ADDI-PREVIOUSLY EXTRA RATE (\$) AMENOMENT TIONAL PAID FOR Ó Total TIONAL FEE (1) FEE (1) Minnes B 20 Ø X\$ 25 ğ Independent DI OFR ENGLE X\$5a On Minus X100 . X200 Application Size Fee (37 CFR 1.16(s)) ... RRST PRESENTATION OF MULTIPLE OFFENDENT CLAIM (FF CFR 1.140) 4180a +360= OR TOTAL TOTAL ADD'L FEE' ADD'L FEE (Cóluma 1) (Catuma 2) (Column 3) CL AMES HIGHEST REMAINING NUMBER PRESENT AFTER RATE (1) ADDI: RATE (1) PREVIOUSLY EXTRA VOO! it. **ÆNDMENT** TIONL PAID FOR TIONAL total FEE (1) Mirus FEE (1) X\$ 25 Independent profit Links X\$50 OR Minus X100 X200 Application Size Fee (37 CFR 1.16(4)) FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (17 OFR 1.140)

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If the entry in cotumn 1 is fees than the entry in cotumn 2, write 'U' in column 3.

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If you need assistance in completing the form, cell 1-890-770-8199 and select option 2

+180z

TOTAL

ADO'L FEE

+360z

TOTAL

OR

OR